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(to be used for all correspondence after initial filing)

Application Number	10/683,798		
Filing Date	10/10/2003		
First Named Inventor	John H. Olsen		
Art Unit	NA		
Examiner Name	NA		
Total Number of Pages in This Submission	3	Attorney Docket Number	976-40-3

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Frederick A. Kaseburg, Graybeal Jackson Haley LLP
Signature	
Date	May 13, 2004

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Stephanie Cox	Date	05/13/2004
Signature			

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PTO/SB/08b(08-03)

Approved for use through 07/31/2006, OMB 0651-0031

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Substitute for form 1449B/PTO

## **INFORMATION DISCLOSURE STATEMENT BY APPLICANT**

**(Use as many sheets as necessary)**

Sheet 1 of 1 Attorney Docket Number 976-40-3

<i>Complete if Known</i>	
<i>Application Number</i>	10/683798
<i>Filing Date</i>	10/10/2003
<i>First Named Inventor</i>	John H. Olsen
<i>Art Unit</i>	NA
<i>Examiner Name</i>	NA
<i>Attorney Docket Number</i>	976-40-3

## NON PATENT LITERATURE DOCUMENTS

Examiner  
Signature

Date  
Considered

**\*EXAMINER:** Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

and not considered. Include copy of this form with next communication to applicant.  
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